

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

Page 1 of 4

During the Reporting Period Did Your Organization:

- |  | Yes | No |
|--|-----|----|
| 10. Have a "subsidiary organization" as defined in Section X of the instructions? .....  |     | X  |
| 11. Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries? .....              |     | X  |
| 12. Have a political action committee (PAC) fund? .....  |     | X  |
| 13. Acquire or dispose of any goods or property in any manner other than by purchase or sale? .....  |     | X  |
| 14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? .....  | X   |    |
| 15. Discover any loss or shortage of funds or other property? .....<br>(Answer "Yes" even if there has been repayment or recovery.)  |     | X  |
| 16. Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan? ..... |     | X  |
| 17. Pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000? .....   |     | X  |
| 18. Have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a business enterprise? .....   |     | X  |

(If the answer to any of the above questions is "Yes," provide details in Item 56 on page 1 as explained in the instructions for each item.)

19. How many members did your organization have at the end of the reporting period? 82

20. What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization? \$ 50 000

21. During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/procedures listed in the instructions? ..... Yes No X  
(If the constitution and bylaws have changed, attach two new dated copies. If practices/procedures have changed, see the instructions.)

22. What is the date of your organization's next regular election of officers? MO 06 YEAR 2002

23. What are your organization's rates of dues and fees?  
(Enter a minimum and maximum if more than one rate applies for any line.)

Rates of Dues and Fees	
(a) Regular Dues/Fees	\$ 60 <sup>00</sup> per QTR (Month, Year, etc.)
(b) Initiation Fees	\$ 350 <sup>00</sup>
(c) Transfer Fees	\$ _____
(d) Work Permits	\$ _____ per _____ (Month, Year, etc.)

# 24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER: 022-556

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	Status (C)*			
1. Last Name: SCULLIN First Name: LEN Title: PRESIDENT Status: C		200		200
2. Last Name: BIENIO First Name: VIC Title: VICE PRESIDENT Status: C				
3. Last Name: STRAWBRIDGE First Name: PAUL Title: RECORDING SEC Status: C		800		800
4. Last Name: WIG First Name: DON Title: FINANCIAL SEC Status: C		1520		1520
5. Last Name: SMITH First Name: BOB Title: TREASURER Status: N		800		800
6. Last Name: MONTEROSSA First Name: FRANK Title: CONDUCTOR Status: C				
7. Last Name: MELLARD First Name: CHARLIE Title: WARDEN Status: C				
8. Totals from additional pages (if any)				
9. Totals of Lines 1 through 8		3320		3320
Enter the Total from Line 11 in ..... Item 45 ⇒		10. Less Deductions		
		11. Net Disbursements 3320		

\*Code for Status (C): past officer — P; continuing officer — C; new officer during the reporting period — N.

(If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.)

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER: 022-556

STATEMENT A ASSETS AND LIABILITIES	ASSETS	Start of Reporting Period (A)	End of Reporting Period (B)	LIABILITIES	Start of Reporting Period (C)	End of Reporting Period (D)
	Item			Item		
	25. Cash .....	53730	49256	32. Accounts Payable .....		
	26. Loans Receivable .....			33. Loans Payable .....		
	27. U.S. Treasury Securities .....			34. Mortgages Payable .....		
	28. Investments .....	31950	32598	35. Other Liabilities .....		
	29. Fixed Assets .....			36. TOTAL LIABILITIES .....	0	0
	30. Other Assets .....			37. NET ASSETS (Item 31 less Item 36) .....	85690	82124
	31. TOTAL ASSETS .....	85690	82124			

STATEMENT B RECEIPTS AND DISBURSEMENTS	CASH RECEIPTS	AMOUNT	CASH DISBURSEMENTS	AMOUNT
	Item		Item	
	38. Dues .....	12351	45. To Officers (from Item 24) .....	3320
	39. Per Capita Tax .....		46. To Employees (less deductions) .....	
	40. Fees, Fines, Assessments & Work Permits .....		47. Per Capita Tax .....	6043
	41. Interest & Dividends .....	2627	48. Office & Administrative Expense .....	5362
	42. Sale of Investments & Fixed Assets .....		49. Professional Fees .....	834
	43. Other Receipts .....		50. Benefits .....	3456
	44. TOTAL RECEIPTS .....	14978	51. Contributions, Gifts & Grants .....	145
	<p>If total receipts reported in Item 44 are \$200,000 or more, your organization must file Form LM-2 instead of this form.</p>		52. Purchase of Investments & Fixed Assets .....	
53. Loans Made .....				
54. Other Disbursements .....			21	
55. TOTAL DISBURSEMENTS .....			19181	

ORGANIZATION NAME: CARPENTERS AND JOINERS OF AM.  
 ENDING DATE OF PERIOD COVERED: 6-30-2001

FILE NUMBER: 022-556

PAGE 1 OF 1 ADDITIONAL PAGES

## 24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)		Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)			
Last Name <u>WIG</u> First Name <u>TOM</u> Title <u>TRUSTEE</u> Status <u>C</u>				
Last Name <u>ANDERSON</u> First Name <u>HALLIE</u> Title <u>TRUSTEE</u> Status <u>C</u>				
Last Name <u>MAILLIARD</u> First Name <u>STEVE</u> Title <u>TRUSTEE</u> Status <u>C</u>				
Last Name  First Name  Title  Status				
Last Name  First Name  Title  Status				
Last Name  First Name  Title  Status				
Last Name  First Name  Title  Status				
Last Name  First Name  Title  Status				
Totals				

ORGANIZATION NAME: \_\_\_\_\_

ENDING DATE OF PERIOD COVERED: \_\_\_\_\_

FILE NUMBER: \_\_\_\_\_

PAGE \_\_\_\_ OF \_\_\_\_ ADDITIONAL PAGES

## 24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS *(continued)*

(A) Name <i>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)</i>		Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
(B) Title <i>(Enter title of officer, such as PRESIDENT or TREASURER.)</i>	Status (C)			
Last Name _____ First Name _____	Title _____ Status _____			
Last Name _____ First Name _____	Title _____ Status _____			
Last Name _____ First Name _____	Title _____ Status _____			
Last Name _____ First Name _____	Title _____ Status _____			
Last Name _____ First Name _____	Title _____ Status _____			
Last Name _____ First Name _____	Title _____ Status _____			
Last Name _____ First Name _____	Title _____ Status _____			
Last Name _____ First Name _____	Title _____ Status _____			
Totals				